BATEME ADDITION			Application or Docket Number				
27	ctive October 1, 2	ORD 09/4/02/095					
CLAIMS A	SMALI	ENTITY		OTU	- Turan		
TOTAL CLAIMS	TYPE		OF		R THAN		
~^n	RAT	E FEE		RATE	FEE		
FOR	NUMBER FILED NUMBER EXTRA				Ŋo _F	BASIC FE	ε
TOTAL CHARGEABLE CLAIMS		X\$ 9	=	OF	X\$18=		
DEPENDENT CLAIMS	X40-	2)/9/	7.	X80=	+		
IULTIPLE DEPENDENT CLAIM PI		acc	OR	7005	 		
If the difference in column 1 is	+135:		OR	+270=			
If the difference in column 1 is	TOTA	1954	OR	TOTAL			
111111111111111111111111111111111111111	MENDED - PART	ГІІ				OTHE	THAN
(Column 1)	(Colum	SMAL	L ENTITY	OR	SMALL	ENTITY	
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7.7.1	Minus - 20		X\$ 9=	FEE	ÓR	X\$18=	FEE
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					OR	X80=	
			+135=		OR	+270=	
2-25-03			TOTAL	-	OR .	TOTAL	
(Column 1)	(Column	1 2) (Column 3)	ADDIT. FEE	<u> </u>	Δ., Δ	DDIT. FEE	
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			+135=		OR	+270=	
8-20-03			TOTAL ADDIT, FEE	84	OR A	TOTAL DIT, FEE	
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PTO/SB/06 (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 01 +62 615				
CLAIMS AS FILED - PART I (Column 1) (Column 2)					_	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
FOR NUMBER FILED NUMBER EXTRA		ER EXTRA		RATE	FEE		RATE	FEE			
BASIC FEE (37 CFR 1.16(a))			1		s	25	10112	s			
TOTAL CLAIMS						1		<u>*</u>	OR		3
(37 CFR 1.16(c)) minus 20 = * INDEPENDENT CLAIMS		-		1	X \$=		OR	X \$=	<u> </u>		
(37 CFR 1.16(b)) minus 3 = *				-	x \$=		OR	x \$=			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))]	+ \$=		OR	+ \$=		
* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL	<u> </u>	OR	TOTAL		
CLAIMS AS AMENDED PART II											
3-22-04 (Column 1) (Column 2) (Column 3)				_	SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY			
A TN	R	CLAIMS EMAINING AFTER IENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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4-12-0	$) \vee_{(c)}$	olumn 1)		(Column 2)	(Column 3)						
B TNT B	RE	CLAIMS EMAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$ =		OR	+\$ =		
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11-29-0	4 10	olumn 1)		(Column 2)	(Column 3)					1 1 1 1	
ENTC	RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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Total Total Grant 1.16(c) Independent Grant 1.16(c) Total T))	7	Minus	***10	=		x \$=		OR	x \$=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					Ì	+\$ =		OR :	+ \$ =		
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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.